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FORM D

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

`SEP 052008

FORM D

Woshington, DC ~101 NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	SEC USE O	NLY
Prefix	5	Serial
	1	<u> </u>
	DATE RECE	IVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	PROCESSED
Private Placement of Limited Partnership Interests of The Precept Fund (QP), L.P.	PROOF
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE	SEP 1 1 2008
Type of Filing: New Filing 🗵 Amendment	THE PENTERS
A. BASIC IDENTIFICATION DATA	THOMPON MEGITIN
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	•
The Precept Fund (QP), L.P.	e Number (Including Area Code)
Address of Executive Offices (No. and Street, City, State, Zip Code)  Telephon  200 Crescent Court, Suite 1450, Dallas, Texas 75201	(214) 880-7444
Address of Principal Business Operations (No. and Street, City, State, Zip Code) Telephone Number (Includin	
(if different from Executive Offices)	ig Area Coacy
Brief Description of Business	<del></del>
Investment Partnership	
Type of Business Organization	
corporation	other (please specify):
business trust Ilmited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization:  Month Year  9 8	☐ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: TX	
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774	1(6)
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Executed by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or	xchange Commission (SEC) on the earlier of the date it is
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photoc signatures.	opies of the manually signed copy or bear typed or printed
Information Required. A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes there changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.	eto, the information requested in Part C, and any material
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE a mist file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a preciamount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of the ATTENTION	ondition to the claim for the exemption, a fee in the proper
Failure to file notice in the appropriate states will not result in a loss of the federal exempt the appropriate federal notice will not result in a loss of an available state exemptic predicated on the filing of a federal notice.	



SEC 1972 (2-97)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	1		A. BASIC IDENTIF	ICATION DATA		
2.	Enter the information requ	ested for the fo	llowing:			
х	Each promoter of the issue	r. if the issuer l	has been organized within the p	oast five years:		
X			to vote or dispose, or direct the		r more of a class of	of equity securities of the
	issuer;		,	•		
X	Each executive officer and	director of cor	porate issuers and of corporate	general and managing partne	rs of partnership is	ssuers; and
$\mathbf{X}$	Each general and managing	g partner of par	rtnership issuers.			
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Fu	ll Name (Last name first, if it	ndividual)				
Pr	ecept Capital Management	L.P., the Gen	eral Partner			
Bu	siness or Residence Address	(Number and S	Street, City, State, Zip Code)		• •	
200	0 Crescent Court, Suite 145	0, Dallas, Tex	as 75201			
Ch	eck Box(es) that Apply:	] Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑General and/or Managing Partner
Fu	ll Name (Last name first, if it	ndividual)				
Pr	ecept Management, LLC, g	eneral partne	r of the General Partner			
Bu	siness or Residence Address	(Number and S	Street, City, State, Zip Code)			
20	D Crescent Court, Suite 145	0, Dallas, Tex	as 75201			
Ch	eck Box(es) that Apply:	] Promoter	⊠ Beneficial Owner	☑Executive Officer	☐ Director	☐ General and/or Managing Partner
	Il Name (Last name first, if it			•		
			t of the general partner of the	General Partner		
	siness or Residence Address  O Crescent Court, Suite 145					
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
	ll Name (Last name first, if it					
Ro	ossien, Nick, CFO and CC	O of the Gener	ral Partner			
Bu	siness or Residence Address  O Crescent Court, Suite 145	(Number and S	Street, City, State, Zip Code)			
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Fu	ll Name (Last name first, if it	ndividual)	<del></del>			
Bu	siness or Residence Address	(Number and S	Street, City, State, Zip Code)			
_						<del></del>

		•				B. IN	FORM	IATIO	N ABO	UT O	FERI	NG	•	<del></del>
1. H	Answer also in Appendix, Column 2, if filing under ULOE.											Yes □	No ⊠	
2. W	What is the minimum investment that will be accepted from any individual?											\$ <u>500</u>	.000.00	
3. D	3. Does the offering permit joint ownership of a single unit:										Yes ⊠	No □		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A Full Name (Last name first, if individual)														
Full N	ame (Las	t name i	ırst, ii in	idividua	1)									
Busine	ss or Res	idence A	Address	(Numbe	r and St	reet, City	y, State,	Zip Cod	le)					
Name	of Assoc	iated Bro	oker or I	Dealer										
	in Which													A11 C4-4
(Check	c "All Sta [AK]	ites" or o	neck ind	iividual [CA]	[CO]	[СТ]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]		All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	(NH)	. , [NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Las	t name f	irst, if in	dividua	l)									
Busine	ss or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Name	of Assoc	iated Br	oker or I	Dealer										•
	in Which												П	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]		· III Cimios
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Las	t name f	irst, if in	dividua	1)									
Busine	ss or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Name	of Assoc	iated Br	oker or I	Dealer					•		,			
	in Which													
(Check	c "All Sta	ites" or o	check inc	dividual	States).	•••••			•••••	************			U	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)		
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange					
	offering, check this box \( \pi \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	(	Aggreg Offering		A	mount Already Sold
	Debt	\$	_		\$	0
	Equity	\$_ \$	0		\$_ \$	0
	□ Common □ Preferred	<b>"</b> _			Ψ	
		c	0		e	0
	Convertible Securities (including warrants)		1,600,00	30.00	ъ_ Т	1,600,000.00
	Partnership Interests			JU.UU		0.000,000
	Other (Specify)		1 (00 0	20.00		
	Total	⊅	1,600,00	JU.UU	<b>3_</b>	1,600,000.00
	Answer also in Appendix, Column 3, if filing under ULOE					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."					
			Numb Invest			Aggregate Pollar Amount of Purchases
	Accredited Investors		2		\$_	1,600,000.00
	Non-accredited Investors		0		\$_	0
	Total (for filings under Rule 504 only)		N/A_		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering		Туре	of	r	Pollar Amount
	Type of offering		Secur		_	Sold
	Rule 505		N/A	•	\$	N/A
	Regulation A		N/A		<u> </u>	N/A
	Rule 504		N/A		<u> </u>	N/A
	Total		N/A		\$_	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secur this offering. Exclude amounts relating solely to organization expenses of the issuer. The informable given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.  Transfer Agent's Fees	ation an	may		¢	0
	-				₽	
	Printing and Engraving Costs				2_	0
	Legal Fees.			×	?	10,000.00
	Accounting Fees				2_	0
	Engineering Fees				2_	0
	Sales Commissions (specify finder's fees separately)				\$	0
	Other Expenses (identify)				\$_	0
	Total			×	\$_	10,000.00

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES A	ND USE	OF PR	OCEEDS	5
	and total expenses furnished in response to P	e offering price given in response to Part C-Ques art C-Question 4.a. This difference is the "adjust	ed gross			\$_1,590,000.00
5.	each of the purposes shown. If the amount for	oss proceeds to the issuer used or proposed to be or any purpose is not known, furnish an estimate total of the payments listed must equal the adjus Part C-Question 4.b. above.	and			
				Of Dire	ments to ficers, ctors, & filiates	Payments To Others
	Salaries and fees			<b>\$</b>		<b>s</b>
	Purchase of real estate			<b>s</b>		S
	Purchase, rental or leasing and installar	tion of machinery and equipment		\$		<b>\$</b>
	Construction or leasing of plant building	ngs and facilities		\$		<b>s</b>
		ling the value of securities involved in this offering or securities of another issuer pursuant to a merg		<b>s</b>		s
	Repayment of indebtedness			\$		\$
	Working capital			\$		<b>\$</b>
	Other (specify) (investments)			s	⊠	<b>\$</b> _1,590,000.00
	Column Totals			<b>s</b>	⊠	\$ <u>1,590,000.00</u>
	Total Payments Listed (column totals a	added)			\$ <u>1,5</u>	90,000.00
_		D. FEDERAL SIGNATURE			= =	
ign	ature constitutes an undertaking by the issuer to	by the undersigned duly authorized person. If this furnish to the U.S. Securities and Exchange Coredited investor pursuant to paragraph (b) (2) of R	nmission, t			
Iss	uer (Print or Type)	Signature	Date			
Th	e Precept Fund (QP), L.P.	N.66	Septembe	<u>د ک</u>	2008	
	ume of Signer (Print or Type)	Title of Signer (Print or Type)				· · · · · ·
Ni	ck Roossien	CFO and CCO of Precept Capital Management, (QP), L.P.	L.P., the go	neral pa	utner of Th	ne Precept Fund
	·	ATTENTION				
_	Intentional misstatements or omi	ssions of fact constitute federal criminal	<u>violations</u>	. (See	18 U.S.C.	1001).

	<b>)</b>	E. STATE SIGNATURE					
1.		resently subject to any of the disqualification pro		Yes □	No 🗵		
	See Appendi	x, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state ir by state law.	which this notice i	s filed, a notice o	on Form D		
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written	request, information	n furnished by t	he issuer to		
4.		ssuer is familiar with the conditions that must be which this notice is filed and understands that the at these conditions have been satisfied.					
	e issuer has read this notification and knows t dersigned duly authorized person.	he contents to be true and has duly caused this no	otice to be signed or	its behalf by the	e		
Iss	uer (Print or Type)	Signature	Date				
Th	e Precept Fund (QP), L.P.	September <u>3</u> , 2008					
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Nick Roossien  CFO and CCO of Precept Capital Management, L.P., the general partner of The (QP), L.P.					ecept Fund		

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### **APPENDIX**

1	. ;	2	3		4					
	Intend to non-accordinvestors (Par	o sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL										
AK										
AZ										
AR				•				-		
CA			<del></del>							
со										
СТ										
DE										
DC							,			
FL										
GA										
ні										
ID										
IL_	<u> </u>									
IN										
IA										
KS										
KY										
LA					<b></b>					
ME										
MD										
MA										
MI										
MN										
MS										
МО										

## APPENDIX

1	2 3				4			5
	non-ac- investor (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
мт		:						
NE								
NV								
NH								
NJ								
NM				<u>"</u>				
NY								
NC				•				
ND								
ОН								
ОК								
OR								
PA					_			
RI								
SC								
SD				•				
TN								
TX		No	Limited Partnership Interests \$1,600,000.00	2	\$1,600,000.00	0	<b>\$</b> 0	No
UT								
VT								
VA								
WA								
WV								
WI								

## **APPENDIX**

1		2	3		4			5		
	non-acc investors (Par	to sell to credited s in State et B- m 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре о	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
WY										
PR										

